

OPT-IN CONSENT FORM*Michael, et al v. Indiana Packers Corporation***4:08-cv-00013-AS-APR**

United States District Court, Northern District of Indiana

Complete And Mail To:

ATTN: INDIANA PACKERS Corporation

[INSERT NAME OF AGREED UPON CLAIMS ADMINISTRATOR]**Pursuant to Fair Labor Standards Act, 29 U.S.C. § 216(b)**

1. I consent and agree to pursue my claims arising out of violations of the Fair Labor Standards Act in connection with the above-referenced lawsuit.
2. I worked as an hourly employee of Indiana Packers Corporation from on or about (month, year) 2001 to on or about MAY 2003 (month, year).
3. I understand that this lawsuit is brought under the Fair Labor Standards Act of 1938, as amended, 29 U.S.C. § 201 *et seq.* I hereby consent, agree and opt-in to become a Plaintiff herein and be bound by any judgment of the Court or any settlement of this action.
4. I specifically authorize the Named Plaintiffs, and their attorneys, Philip (Felipe) Downey, Esq., Berger & Montague, P.C., and Schneider & Wallace, as my agents to prosecute this lawsuit on my behalf and to negotiate a settlement of any and all compensation claim(s) I have against INDIANA PACKERS CORPORATION, regarding my claims.

area code - 765

Name: (Please Print)	Date of Birth:
<i>MARIA Ofelia Garrison</i>	<i>2-5-1944</i>
Address:	Phone No. 1: <i>564-3825</i> Phone No. 2: <i>765-564-0037 cell</i>
318 Cook Street Delphi, Indiana 46923-1501	

****NOTE****

Statute of Limitations concerns mandate that you return this form as soon as possible to preserve your rights.